



**BAKER BOTTS LLP**

**PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)**

Docket Number (Optional)  
AP35352 072448.0362

In re Application of **Ralph A. Backhaus**

Application Number **10/630,548**

Filed **07/30/2003**

For **CARDIOPROTECTIVE THERAPIES**

Group Art Unit  
**1651**

Examiner  
**To Be Assigned**

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- ☐ One month (37 CFR 1.17(a)(1)) \$ \_\_\_\_\_
- ☐ Two months (37 CFR 1.17(a)(2)) \$ \_\_\_\_\_
- ☐ Three months (37 CFR 1.17(a)(3)) \$ \_\_\_\_\_
- ☒ Four months (37 CFR 1.17(a)(4)) \$ **1,480**
- ☐ Five months (37 CFR 1.17(a)(5)) \$ \_\_\_\_\_

☒ **Applicant claims small entity status.** See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ **740**.

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number **02-4377**.

I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor

☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record.

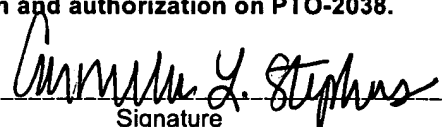
☐ attorney or agent under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

June 22, 2004

Date

PTO Reg No.: 41,328

  
Signature

Carmella L. Stephens

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.